

## MSS Clinical Project Next Steps

### **Desired MSS Clinical project outcomes:**

- Improvement in early prenatal care access for all Medicaid women
- Reduction in preterm birth, infant mortality and poor birth outcomes for Medicaid women with special attention to those identified as high risk.

**Phase 2 of MSS Project:** Plan and implement QI projects to improve delivery of MSS over the next 1-2 years.

1. Risk factors: Refine current risk factor list towards goal of improving birth outcomes for both mother and infant.
2. Documentation: Develop and implement quality improvement changes to MSS/ ICM documentation forms.
3. Barriers to Care: Support/expand current work being done at the state and local level to reduce barriers to early prenatal care access and MSS/ICM services.

### **Example of Plan for Addressing Barriers to Care:**

- County workgroups: continue support FS providers and other stakeholders in addressing prenatal care access issues and preterm birth.
- Stakeholder survey: Develop questions specifically focused toward barriers to care. Explore use of “survey monkey” to collect input.
- Transportation and interpreter services: Continued work at state and local level. Explore developing health education information in pictorial form.
- CSO:
  - Explore the feasibility of adding an additional question about previous premature birth or miscarriage to CSO intake form.
  - Explore processes for referring women to Prenatal Care providers and MSS/ICM services, with revisions as needed.
- Pregnancy to Work/Work First: Explore developing Healthy pregnancy class. I.e. importance of early prenatal care, warning signals of preterm labor, birth interval.
- Children’s Administration: Continue current policy efforts in substance abuse referrals. Include in orientation of CA staff to FS services, health messages on increasing birth intervals, warning signs of pregnancy, and smoking cessation related to improving birth outcomes.
- Mental Health: Continue efforts at policy level focused toward collaboration at state and local level to provide services to at risk pregnant and parenting women
- WIC: Continue efforts at a policy level focused on promoting collaboration between WIC and FS providers, MOU’s, documentation, health education efforts focused on reducing preterm birth, early and continuous prenatal care, etc.
- Native American/Alaskan Natives; African American culture specific needs
- Others?

**Phase 3** - Plan for long term quality improvements to the First Steps program through piloting activities supported by evidenced based practice.